PTO/SB/22 (01-08)
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)	Docket Number (Optional)								
FY 2008 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H. R. 4818).)	31229-229760								
Application Number 10/577,852-Conf. #4885	Filed December 26, 2006								
For LIFTING DEVICE			,						
Art Unit 3652	Examiner D. J. Kramer								
This is a request under the provisions of 37 CFR 1.136(a) to extend the perapplication.	iod for filing a reply in	the above	identified						
The requested extension and fee are as follows (check time period desired	and enter the approp	riate fee bel	low):						
<u>Fee</u>	Small Entity Fee								
One month (37 CFR 1.17(a)(1)) \$120	\$60	\$_							
x Two months (37 CFR 1.17(a)(2)) \$460	\$230	\$ _	230.00						
Three months (37 CFR 1.17(a)(3)) \$1050	\$525	\$_							
Four months (37 CFR 1.17(a)(4)) \$1640	\$820	\$_							
Five months (37 CFR 1.17(a)(5)) \$2230	\$1115	\$_							
Applicant claims small entity status. See 37 CFR 1.27.									
A check in the amount of the fee is enclosed.									
Payment by credit card. Form PTO-2038 is attached.									
X The Director has already been authorized to charge fees in this	application to a Depo	osit Accour	nt.						
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 22-0261 . I have enclosed a duplicate copy of this sheet.									
WARNING: Information on this form may become public. Credit card in Provide credit card information and authorization on PTO-2038.									
I am the applicant/inventor.									
assignee of record of the entire interest. See 37 C Statement under 37 CFR 3.73(b) is enclosed	FR 3.71. I. (Form PTO/SB/96).							
x attorney or agent of record. Registration Number	47,070								
attorney or agent under 37 CFR 1.34.									
Registration number if acting under 37 CFR 1.34	<u> </u>								
Stone Schwarf	March 12, 2008								
Signature	Date								
Steven J. Schwarz	(202) 344-4295								
Typed or printed name	Teleph	one Numb	er						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.									
X Total of forms are submitted.									

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PTO/SB/17 (10-07)
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Effective on 42/09/2004			Complete if Known							
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Application Num	10/577,852-Co	7,852-Conf. #4885						
FEE TRANSMITTAL		Filing Date D		December 26, 2006						
		First Named Inv	entor	Lionel Foster						
For FY 2008			Examiner Name		D. J. Kramer					
X Applicant claims small entity status. See 37 CFR 1.27			Art Unit		3652	3652				
TOTAL AMOUNT OF PAYMENT		(\$) 230.00		Attorney Docket	No.	31229-229760				
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order None Other (please identify):										
x Deposit Account Deposit Account Number: 22-0261 Deposit Account Name: Venable LLP										
For the above-identific	ed deposi	t account, the Dir	ector is	hereby authorize	ed to: (che	eck all that apply)				
x Charge fee(s) ir	ndicated b	elow		Charge	e fee(s) i	ndicated below, ex	cept for t	ne filing fee		
Charge any additional fee(s) or underpayments of x Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17										
FEE CALCULATION										
1. BASIC FILING, SEARCH,	AND EXA	AMINATION FEE	s							
	FILI	NG FEES	ŞE	ARCH FEES	EXAM	INATION FEES				
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$	Small Entity) Fee (\$)	Fees F	Paid (\$)		
Utility	310	155	510	255	210	105				
Design	210	105	100	50	130	65				
Plant	210	105	310	155	160	80				
Reissue	310	155	510	255	620	310				
Provisional	210	105	0	0	0	0				
2. EXCESS CLAIM FEES								Small Entity		
Fee Description Each claim over 20 (including Reissues)							Fee (\$) 50	Fee (\$) 25		
Each independent claim over 3 (including Reissues)						210	105			
Multiple dependent claims							370	185		
Total Claims Extra Cl	aims	Fee (\$)	Fee	Paid (\$)	1	Multiple Depende	ent Claims			
·=	x					Fee (\$)	Fee Paid (\$	<u>3)</u>		
HP = highest number of total claim	•	-	_			-		_		
Indep. Claims Extra Cl	aims x	Fee (\$)	Fee	Paid (\$)						
HP = highest number of independe		aid for, if greater than	3.							
3. APPLICATION SIZE FEE										
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer										
listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50										
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)										
	ra Sheets						= <u>Fee</u>	r aiu (\$)		
100 = /50 = (round up to a whole number) x =										
Non-English Specification, \$130 fee (no small entity discount)										
Other (e.g., late filing surcharge): 2252 Extension for response within second month 230.00										
SUBMITTED BY		2)								
	2110	Schwar	^	Registration No. (Attorney/Agent)	47,070) Telephone	(202) 34	4-4295		
Signature Steven J. Schwarz (Attorney/Agent) 47,070				Date	Date March 12, 2008					
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